Proforma: 2





## **Faculty Course Review Report**

(To be filled by each teacher at the time of Course Completion)

	•	Officer) tog									S/HeI		
Department:		, ,			•	Facı		•					
Course Code:			Title:										
Session:				Seme	ester:	Autumn 🗌		Spr	ing	☐ Summer [			
Credit Value:				Leve	Level:				Prerequisites:				
Name of Course Instructor:				No. of Students Contact Hours		Lectures Seminars			Other (Please State)				
Assessment M give precise detail exams, weighting	ls (no & leng	th of assignme	ents,										
Distribut required)		le/Marks a	nd ot	her O	Outcome	es: (a	dop	t the	grad	ing sys	tem as	S	
Undergraduate	Originally Registered	•		rade B	%Grad C	le l	D	Е	F	No Grade	With	drawal	Total
No. of Students													
Post-Graduate Origina Register					%Grac	le l	D	Е	No Grade		Withdrawal		Total
No. of Students													
Feedback: (These bo	first summ xes will exp	n (Course (narize, then pand as you valuation) (	comn type	nent o in you	n feedb ır answ	ack re		-	om:		1		

2) External Examiners or Moderators (if any)

3) Student /staff Consultative Committee (SSCC) or equivalent, (if any)								
4) Curriculum: comment on the continuing appropriateness of the Course curriculum in relation to the intended learning outcomes (course objectives) and its compliance with the HEC Approved / Revised National Curriculum Guidelines								
5) Assessment: comment on the continuing effectiveness of method(s) of assessment in relation to the intended learning outcomes (Course objectives)								
6) Enhancement: comment on the implementation of changes proposed in earlier Faculty Course Review Reports								
7) Outline any changes in the future delivery or structure of the Course that this semester/term's experience may prompt								
Name:Date:								
Name:Date:								